

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT										
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP	IND	DEP	IND	DEP
1	/						51								
2							52								
3	/						53	/							
4							54	/	/						
5							55	/							
6							56	/							
7							57								
8							58								
9							59	/							
10							60	/	/						
11							61	/	/						
12							62	/	/						
13							63	/	/						
14							64	/	/						
15							65	/	/						
16							66	/	/						
17							67	/	/						
18							68	/	/						
19							69	/	/						
20	/						70	/	/						
21							71	/	/						
22							72								
23	/						73	/	/						
24							74	/	/						
25	/						75								
26							76								
27							77								
28							78								
29							79								
30							80								
31							81								
32	/						82								
33	/						83								
34							84								
35							85								
36							86								
37							87								
38							88								
39							89								
40	/						90								
41	/						91								
42	/						92								
43	/						93								
44							94								
45							95								
46							96								
47							97								
48							98								
49	/						99								
50							100								
TOTAL IND.	↓		↓		↓		TOTAL IND.	29		↓		↓		↓	
TOTAL DEP.	←		←		←		TOTAL DEP.	65		←		←		←	
TOTAL CLAIMS							TOTAL CLAIMS	74							